## POH000089711

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	PRATION: Travers Hartnett P.	A.			
DOCUMENT NUM	BER: P04000089711				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Christian Farrell				
		Name of Contact Perso	n		
	Travers Hartnett P.A. d.b.a. Travers Hartnett Insurance Agency				
	Firm/ Company				
	1045 E Atlantic Ave Suite 203				
	Address				
	Delray Beach, FL 33483				
		City/ State and Zip Cod	е	<del></del>	
	cfarrell@traversins.com				
	<del>-</del>	sed for future annual report	notification)	—	2025 JUN
				三流	<u>C</u>
For further information	on concerning this matter, pleas	se call:		71.57	ည်
Christian Farrell		954 at (	821-1678		7
Name	of Contact Person	Area Co	de & Daytime Telephone	Numbér	—မှာ —
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:		2
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
An Div	tiling Address nendment Section vision of Corporations D. Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Travers Hartnett P.A. (Name of Corporation as currently filed with the Florida Dept. of State) P04000089711 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>∨</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Debra Powers	1045 E Atlantic Ave, Ste 203
Add			Delray Beach, FL 33483
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			

Mach additional sheets, if necessary).	(Be specific)	
-		
•		
<u>f an amendment provides for an excl</u>	ange, reclassification, or cancellation of issue	ed shares,
provisions for implementing the ame	dment if not contained in the amendment it	<u>self:</u>
(if not applicable, indicate N/A)		
	<u> </u>	
		<u> </u>
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		<del></del>
	(no more than 90 days after amendment file date	)
<b>Note:</b> If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirement epartment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amufficient for approval.	endment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cash	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
05/29/202: Dated		
Signature	/ The	
(By a c	rector, president of other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or ted tiduciary by that fiduciary)	
	Tim Rentro	
	(Typed or printed name of person signing)	
	CEO/Agency Principle	
	(Title of person signing)	